

# Safety Simply Stated



## MESSAGE FROM THE CITY SAFETY OFFICER, Mike Alio

February 2005

Volume 2, Issue 2

**F**ebruary 2005 will bring several changes to the way the City conducts business, with regard to Workers' Compensation and Safety. A computerized Claims Administration software system is due to go on-line February 8. New operational policies and procedures have been developed in conjunction with the new system, which will clarify roles and responsibilities for employees, supervisors, and managers. Each department has an assigned contact for workers' compensation questions and a return to work coordinator who will assist in bringing employees back to transitional duty assignments.

Some of the changes are due to major revisions in the State's Workers' Compensation laws. Additional changes are being implemented so the City's Workers' Compensation program can operate more efficiently, save money, and provide better care, and service to injured employees. Training on the new policies and procedures will be conducted for all Departments during February and March.

The City Manager has made employee safety a top priority again this year for humanitarian as well as business reasons. Management's vision is that the City of Long Beach will become a leader in occupational safety and health for the public sector by integrating safe work practices into all the services City workers provide.

Changes to the safety program for 2005 include:

- The formation of an Executive Safety Committee which will include the City Manager and all Department Heads. This committee will be responsible for reviewing safety performance throughout the City.
- The development of a safety program overview booklet that will define general workplace safety rules. All employees will receive a copy of the booklet later this month and will be expected to read and follow the rules outlined in the book.
- The adoption of a new slogan to constantly remind employees of our vision statement. Look for the slogan in the March issue.
- Distribution of the Citywide Safety and Health Manual to each supervisor and manager has already begun. The manual contains the City's written safety programs.

What will be expected of employees? First of all, participation in safety training and following safe work practices – both of which are not an option but an essential part of carrying out our mission to serve the residents of Long Beach. In addition, employees are expected to notify his/her supervisor of any hazardous conditions and immediately report any on-the-job injury.

In subsequent issues, changes and updates to the safety program and policies and procedures, will be reviewed in more depth.

## Headline Health Syndrome

Sarah M. Heames, Health Educator  
City of Long Beach—Nutrition Services Division



**A**ccording to the American Dietetics Nutrition and You: *Trends 2000 Survey*, media has been identified as consumers' leading source of nutrition information with television (48%), magazines (47%), and newspapers (18%) cited as the top three information sources. Books (12%), doctors (11%), family and friends (11%), along with Dietitians and nutritionists (1%), were among other sources cited. It would appear that the knowledge and expertise provided by doctors and other reputed health

professionals would be a more favorable source of information; however, the accessibility has no comparison to that of the television.

While most consumers are not able to converse with doctors and other health professionals on a regular basis for health and nutrition questions, they seek credible sources from the convenience of the Internet. Use any of the following free web-sites to research questions and receive current health trends, facts and inspiration!

**www.webmd.com**; user friendly and contains a variety of information on health related topics.

**www.healthfinder.com**; contains health information and articles provided by organizations like: National Cancer Institute, National Institute of Aging, Centers for Disease Control and Prevention, etc.

**www.cspinet.org**; maintained by the Center for Science in the Public Interest.

**www.smartmouth.org**; nutrition and health website for kids.

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## NIOSH Safety and Health Topic: EYE SAFETY—article from Safety Smart

Each day about 2,000 U.S. workers have a job-related eye injury that requires medical treatment. About one-third of the injuries are treated in hospital emergency rooms and more than 100 of these injuries result in one or more days of lost work. The majority of these injuries result from small particles or objects striking or abrading the eye. Examples include metal slivers, wood chips, dust, and cement chips that are ejected by tools, wind blown, or fall from above. Some of these objects, such as nails, staples, or slivers of wood or metal penetrate the eyeball and result in a permanent loss of vision. Large objects may also strike the eye/face, or a worker may run into an object causing blunt force trauma to the eyeball or eye socket. Chemical burns to one or both eyes from splashes of industrial chemicals or cleaning products are common. Thermal burns to the eye occur as well. Among welders, their assistants, and nearby workers, UV radiation burns (welder's flash) routinely damage workers' eyes and surrounding tissue. In addition to common eye injuries, health

care workers, laboratory staff, janitorial workers, animal handlers, and other workers may be at risk of acquiring infectious diseases via ocular exposure. Infectious diseases can be transmitted through the mucous membranes of the eye as a result of direct exposure (e.g., blood splashes, respiratory droplets generated during coughing or suctioning) or from touching the eyes with contaminated fingers or other objects. The infections may result in relatively minor conjunctivitis or reddening/soreness of the eye or in a life threatening disease such as HIV, Hepatitis B virus, or possibly even avian influenza.

Engineering controls (hooded masks, goggles, shields, etc.) should be used to reduce eye injuries and to protect against ocular infection exposures. Personal protective eyewear, such as goggles, face shields, safety glasses, or full face respirators must also be used when an eye hazard exists. The eye protection chosen for specific work situations depends upon the nature and extent of the hazard, the circumstances of

exposure, other protective equipment used, and personal vision needs. Eye protection should be fit to an individual or adjustable to provide appropriate coverage. It should be comfortable and allow for sufficient peripheral vision. Selection of protective eyewear appropriate for a given task should be made based on a hazard assessment of each activity, including regulatory requirements when applicable.

### Eye Safety



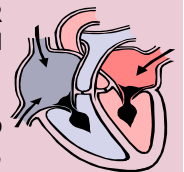
### Your Heart Matters: A Brief Introduction to Heart Health from the American Red Cross

Although you usually don't think about it, your heart is always working. On average a person's heart beats about 70 times per minute, and if the average person lives to be 75 years old, their heart would have beat over 39,420,000 times! Your heart is critical to sustain life, so it makes sense to take care of your heart.

When you look at heart health, you want to determine what your risk factors are. There are two types of risk factors; Controllable and Uncontrollable. Controllable risk factors consist of things that you do that may put your heart at risk for example, smoking, diet, and stress. Uncontrollable risk factors consist of things that you cannot control, age, family history, gender, etc.

When you think about staying healthy, a good starting point would be to see your doctor to help assess what your particular risk factors are, and what you can do to reduce those risks. Another step you can take is to take a CPR class. Just in case you or a loved one experiences a cardiac emergency, CPR training can help you respond effectively and may even save a life.

When it comes to heart health you can never be too prepared. To learn more about what you can do, and how to receive training in CPR you can contact the American Red Cross, Greater Long Beach Chapter at (562) 595-6341, on the web at [www.greaterlongbeachrc.org](http://www.greaterlongbeachrc.org), or [www.redcross.org](http://www.redcross.org)



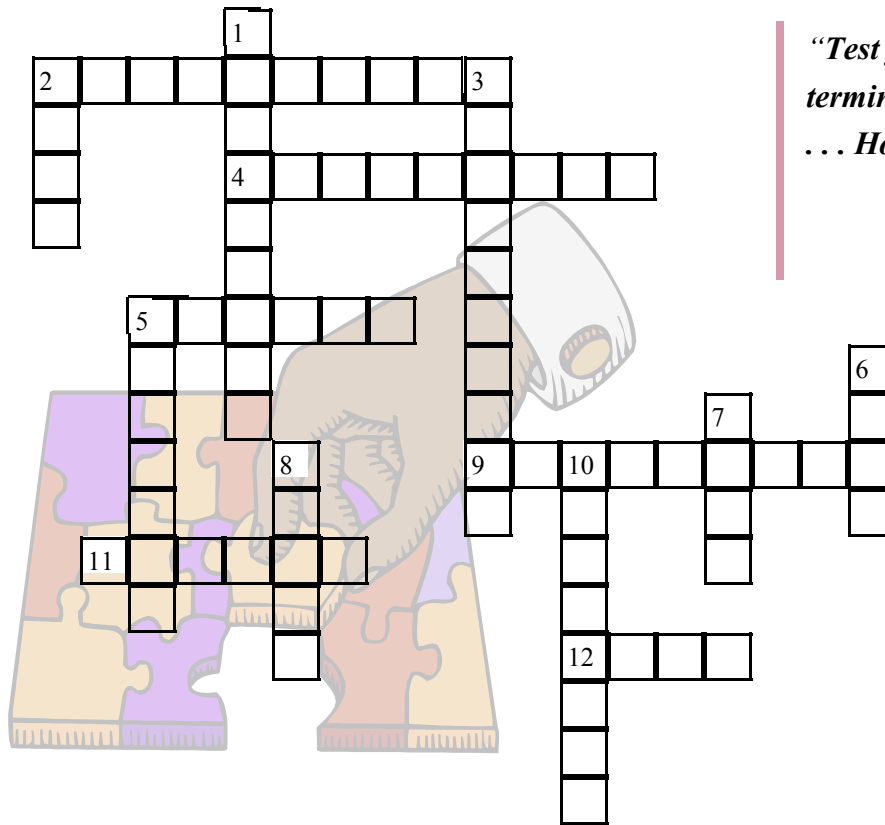
\*All information taken from the American Red Cross, Workplace Training: Your Heart Matters booklet.

**OSHA RECORDKEEPING REMINDER:** OSHA is reminding facilities they must post their injury and illness summary for 2004 beginning February 1. The law requires employers post OSHA Form 300A (not the OSHA 300 Log) from February 1 to April 30, 2005. If you have any questions, please contact the City Safety Office at 570-6476.



**Valentine Grams**—Last day to place orders with your Department Contact Person is Thursday, February 3. Sponsored by the Employee Recognition Committee, Department of Parks, Recreation & Marine.

# Safety Crossword Puzzle



*“Test your knowledge on safety terminology and safety procedures . . . How well will you do?”*

## Across

2. The second word in PPE.
4. Never block \_\_\_\_\_ exits.
5. Never carry a load that \_\_\_\_\_ your vision.
9. The safety goal is to have zero \_\_\_\_\_.
11. It's called the Occupational Safety and \_\_\_\_\_ Administration.
12. The \_\_\_\_\_ is the part of the body most often hurt at work—nearly 25% of all injuries

## Down

1. Properly maintained smoke \_\_\_\_\_ reduce the risk of dying in a fire by 50%.
2. Push rather than \_\_\_\_\_ a heavy load.
3. Replace or repair all damaged \_\_\_\_\_ cords.
5. Be sure everyone in the vehicle \_\_\_\_\_ up.
6. In case of a fire, get out \_\_\_\_\_.
7. Use these instead of your back when lifting.
8. Drink plenty of this to avoid heat exhaustion.
10. Always face the ladder when \_\_\_\_\_ up or down.

\*\*\*\* Answers to Safety Crossword Puzzle are on Page 9 \*\*\*\*

## OSHA's Crystalline Silica Information

By Jerry Wolfe, Safety Officer, Long Beach Energy

**A**pproximately two million U.S. workers are exposed to the dangerous and sometimes deadly effects of silica dust. To help workers protect themselves against such exposure, OSHA has created *Crystalline Silica Exposure* health hazard information cards for both general industry and construction. The pocket-sized cards identify symptoms of silicosis and the most common causes of occupational exposure, as well as how to protect against exposure to the dust. Respirators and other personal protective equipment are also discussed. Below is the text of those cards. We will order and distribute them to those who are using sand blasting equipment, those who cut into concrete, and to those who mix concrete.

### ***What is crystalline silica?***

Crystalline silica is a basic component of soil, sand, granite, and many other minerals. Quartz is the most common form of crystalline silica. Cristobalite and tridymite are two other forms of crystalline silica. All three forms may become respirable size particles when workers chip, cut, drill, or grind objects that contain crystalline silica.

### ***What are the hazards of crystalline silica?***

Silica exposure remains a serious threat to nearly two million U.S. workers, including more than 100,000 workers in high-risk jobs such as abrasive blasting, foundry work, stonecutting, rock drilling, quarry work and tunneling. Crystalline silica has been classified as a human lung carcinogen. Additionally, breathing crystalline silica dust can cause **silicosis**, which in severe cases can be disabling, or even fatal. The respirable silica dust enters the lungs and causes the formation of scar tissue, thus reducing the lungs' ability to take in oxygen. There is no cure for silicosis. Since silicosis affects lung function, it makes one more susceptible to lung infections like **tuberculosis**. In addition, smoking causes lung damage and adds to the damage caused by breathing silica dust.

### ***How is OSHA addressing exposure to crystalline silica?***

OSHA has an established Permissible Exposure Limit, or PEL, which is the maximum amount of crystalline silica to which workers may be exposed during an 8-hour work shift (29 CFR 1926.55, 1910.1000). OSHA also requires hazard communication training for workers exposed to crystalline silica, and requires a respirator program until engineering controls are implemented. Additionally, OSHA has a National Emphasis Program (NEP) for crystalline silica exposure to identify, reduce, and eliminate health hazards associated with occupational exposures.

### ***What are the symptoms of silicosis?***

Silicosis is classified into three types: chronic/classic, accelerated, and acute.

**Chronic/classic silicosis**, the most common, occurs after 15–20 years of moderate to low exposures to respirable crystalline silica. Symptoms associated with chronic silicosis may or may not be obvious; therefore, workers need to have a chest x-ray to determine if there is lung damage. As the disease progresses, the worker may experience shortness of breath upon exercising and have clinical signs of poor oxygen/carbon dioxide exchange. In the later stages, the worker may experience fatigue, extreme shortness of breath, chest pain, or respiratory failure.

**Accelerated silicosis** can occur after 5–10 years of high exposure to respirable crystalline silica. Symptoms include severe shortness of breath, weakness, and weight loss. The onset of symptoms takes longer than in acute silicosis.

## OSHA's Crystalline Silica Information—Continued . . .

(Continued from page 4)

**Acute silicosis** occurs after a few months or as long as 2 years following exposures to extremely high concentrations of respirable crystalline silica. Symptoms of acute silicosis include severe disabling shortness of breath, weakness, and weight loss, which often leads to death.

### ***What can employers/employees do to protect against exposures to crystalline silica?***

- Replace crystalline silica materials with safer substitutes, whenever possible.
- Provide engineering or administrative controls, where feasible, such as local exhaust ventilation, and blasting cabinets. Where necessary to reduce exposures below the PEL, use protective equipment or other protective measures.
- Use all available work practices to control dust exposures, such as water sprays.
- Wear only a N95 NIOSH certified respirator, if respirator protection is required. Do not alter the respirator. Do not wear a tight-fitting respirator with a beard or mustache that prevents a good seal between the respirator and the face.
- Wear only a Type CE abrasive-blast supplied-air respirator for abrasive blasting.
- Wear disposable or washable work clothes and shower if facilities are available. Vacuum the dust from your clothes or change into clean clothing before leaving the work site.
- Participate in training, exposure monitoring, and health screening and surveillance programs to monitor any adverse health effects caused by crystalline silica exposures.
- Be aware of the operations and job tasks creating crystalline silica exposures in your workplace environment and know how to protect yourself.
- Smoking adds to the lung damage caused by silica exposures.
- Do not eat, drink, smoke, or apply cosmetics in areas where crystalline silica dust is present. Wash your hands and face outside of dusty areas before performing any of these activities. Remember: If it's silica, it's not just dust.

### **New Driving Laws Take Effect in 2005**

Excerpts from CHP News (Office of Public Affairs, Sacramento, California)



- **Speed Violations**—(AB 2237, Parra). This new law provides for a fine up to \$750 for a second conviction within three years for driving in excess of 100 mph. The fine increases up to \$1,000 per conviction for subsequent offenses committed within five years of the first two.
- **Child Restraint Age Laws** (AB 1697 of 2003, Torlakson). Beginning January 1, 2005, this bill requires all children under six years of age or weighing less than 60 pounds to be properly restrained in the back seat of passenger vehicles. Exceptions include vehicles with no rear seat, rear seats that are rear or side-facing, and if all rear seats are occupied by children under the age of twelve. The law also prohibits children from riding in the front seat of a vehicle with an active passenger airbag if the child is under the age of one, or weighs less than 20 pounds, or is riding in a rear-facing restraint system.

## Why Safety Belts?

By Laurie Browning, Safety Officer, Department of Parks, Recreation & Marine

**Did you know that seat belts are the MOST effective means of reducing fatalities and serious injuries in a traffic crash? It's true. In fact, seat belts save over 10,000 lives in America every year.**

To understand the value of safety belt use, it's important to understand some of the dynamics of a crash. Every motor vehicle crash is actually comprised of three collisions.

### The Car's Collision

The first collision is known as the car's collision, which causes the car to buckle and bend as it hits something and comes to an abrupt stop. This occurs in approximately one-tenth of a second. The crushing of the front end absorbs some of the force of the crash and cushions the rest of the car. As a result, the passenger compartment comes to a more gradual stop than the front of the car.

### The Human Collision

The second collision occurs as the car's occupant(s) hit some part of the vehicle. At the moment of impact, *unbelted* occupants are still travelling at the vehicle's original speed. Just after the vehicle comes to a complete stop, these *unbelted* occupants will slam into the steering wheel, the windshield, or some other part of the vehicle interior. This is the human collision.

Another form of human collision is the person-to-person impact. Many serious injuries are caused by *unbelted* occupants colliding with each other. In a crash, occupants tend to move toward the point of impact, not away from it. People in the front seat are often struck by *unbelted* rear-seat passengers who have become high-speed projectiles.

### The Internal Collision

Even after the occupant's body comes to a complete stop, the internal organs are still moving forward. Suddenly, these organs hit other organs or the skeletal system. This third collision is the internal collision and often causes serious or fatal injuries.

### So, Why Safety Belts?

During a crash, properly fastened safety belts distribute the forces of rapid deceleration over larger and stronger parts of the person's body, such as the bones of your hips, shoulders and chest. They keep you in place so that your head, face and chest are less likely to strike the windshield, dashboard, other vehicle interiors or other passengers. They also keep you from being thrown out of a vehicle. Also, the safety belt helps belted drivers maintain control of the car by keeping them in the driver's seat. This increases the chance of preventing a second crash.

The safety belt stretches slightly to slow your body down and to increase its stopping distance. The difference between the belted person's stopping distance and the *unbelted* person's stopping distance is significant. It's often the difference between life and death.

Seat belts are your best protection in a crash!

### The Top 4 Reasons Why You Should Wear Your Seat Belt :

- Seat belts can save your life in a crash.
- Seat belts can reduce your risk of a serious injury in a crash.
- Thousands of the people who die in car crashes each year might still be alive if they had been wearing their seat belts.
- It's easy. It only takes a few seconds.

(Continued on page 7)



## Seat Belts– C O N T I N U E D

(Continued from page 6)

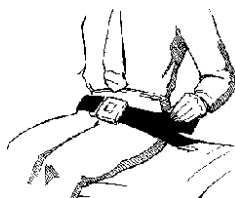
**Seat belt use is required by State law and City policy.  
Non-compliance is grounds for disciplinary action.**

### SEAT BELTS AND AIRBAGS

You still must buckle your seat belt even if you're riding in a car with an air bag. Air bags can cause injuries or even death when people are too close at the time of deployment. Everyone should sit at least 10 inches away from where the air bag is stored. Young children who are riding in child safety seats or older children who are riding in booster seats should ride in the back seat, furthest away from an air bag. This is why children age 12 and under should always be properly buckled up in the back seat.

Front seat driver and passenger side air bags only work in frontal crashes, so if your car is hit on the side or rolls over, the air bag will not protect you - **ONLY** your seat belt, when worn properly, can do that!

**Correct:** The lap belt or lap portion of the lap/shoulder belt should be adjusted so it is low and snug across the pelvis/lap area. **NEVER ACROSS THE STOMACH.**



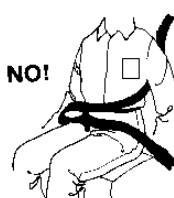
**Incorrect:** In the diagram below, the seatbelt is strapped across the stomach where the belt itself could cause internal damage in a crash.



**Correct:** The shoulder belt should cross the chest and collarbone and be snug. The belt should never be cross the front of the face or be placed behind your back.

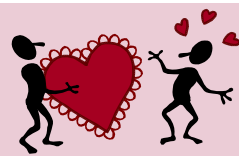






**Incorrect:** The shoulder belt should never be placed behind your back or under your arm.





**February 2005**  
**Citywide Employee Safety Training Calendar**  
 (Schedule as of January 27, 2005)



Dates	Course	Time(s)	Location
February 1 – 3	 Fire Extinguisher Training (2 hrs) AM session	7:30 am – 9:30 am	LB Airport Maintenance Yard, 3150 St. Louis Avenue, Conference Room and Fire Pit (EB 32 <sup>nd</sup> Street just immediately north of the 405 freeway off-ramp onto NB Cherry Avenue)  NOTE: For LBE employees
February 2 – 4	Defensive Driver's Training (4 hrs) AM/PM Sessions	AM—8:00 am – 12:00 pm PM— 12:30 pm – 4:30 pm	Harbor Department, 925 Harbor Plaza 5 <sup>th</sup> floor conference room 
February 7	Life Safety (Module 5) (4 hrs) AM/PM sessions	AM– 8:00 am—12:00 pm PM—12:30 pm—4:30 pm	LBE, 2400 E. Spring Street, Auditorium
February 9	Ergonomics Office Training (1 1/2 hrs) AM/PM sessions	AM—10:00 am—11:30 am PM—1:30 pm—3:00 pm	AM—Main Library, Auditorium, 101 Pacific Avenue PM—PW/EDC, 2929 E. Spring Street, Classroom
February 15	Weapons of Mass Destruction (Module 6) (3 hrs)	1:30 pm—4:30 pm	LBE, 2400 E. Spring Street, Auditorium
February 15-16	Fire Extinguisher Training (2 hrs) AM/PM sessions	2/15—6:30 am—8:30 am & 1:30 pm –3:30 pm  2/16– 6:30 am—8:30 am	PW/EDC, 2929 E. Willow Street, Classroom  NOTE: For PW employees 
February 17	 First Aid (Module 2) (4 hrs) AM/PM sessions	AM—8:00 am– 12:00pm PM—12:30 pm—4:30 pm	American Red Cross, 3150 E. 29th Street, Classroom 3 NOTE: Parking is available in the back parking lot
February 23	Hazwoper Refresher ( 8 hrs)	8:00 am—5:00 pm	PW/EDC, 2929 E. Willow Street, Classroom  NOTE: For DHHS employees



- **NOTE:** Course dates and time are subject to change without notice.
- Please be advised that HR will request a JV charge point from departments who have employees signed up for training and do not show up for the class.
- If you have any questions, please contact May Jong, Risk Management @ [may\\_jong@longbeach.gov](mailto:may_jong@longbeach.gov)



City of Long Beach  
Department of Human Resources  
Risk Management, Safety Office  
333 W. Ocean Boulevard, 10th Floor  
Long Beach, CA 90802  
Phone: (562) 570-6476  
Office Hours: Monday—Friday  
7:30 am—4:30 pm



*Safety is Everybody's Business*

**We're on the web!!**  
<http://wmirror.ci.long-beach.ca.us:8000/hr/employees/safety/index.htm>

## City of Long Beach

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**Did you know you can obtain FREE safety information? Link to: <http://www.ca-osh.com/freeinfo.html>**

## Answers to Safety Crossword Puzzle



### ACROSS

2. Protective
4. Emergency
5. Blocks
9. Accidents
11. Health
12. Back

### DOWN

1. Detectors
2. Pull
3. Electrical
5. Buckles
6. Fast
7. Legs
8. Water
10. Climbing



Congratulations if you got them all correct !